

Nursing Continuing Education Providership



Capt. Francis J. Desjardins
383 TRS/XUEF
Sheppard AFB, TX

Introduction

1. Using student handouts, discuss the requirements for attaining 'Approved Provider' status to the instructor's satisfaction.



Definitions

- ◆ Providership – the ability to provide continuing education credit to organizational activities IAW ANCC COA criteria.

Definitions

- ♦ Provider – the individual or organization that has the authority from HQ AFPC/DPAMN to provide continuing education credit IAW ANCC COA criteria.



Definitions

- ◆ **Provider Renewal** – application process required to continue to provide continuing education credit IAW ANCC COA criteria.

Application Process

- ◆ Part I: Fact Sheet
 - Name of Organization
 - Name of Provider Unit
 - Address/phones/e-mails/etc.
 - Title or Position



Application Process

- ◆ Part II: Demographic Profile
 - First time application vs renewal
 - Past Organizational Activities
 - Past Participants



Application Process

♦ Part III: Eligibility

- Organization seeking accreditation
- Office providing administration
- Date of operation
- Name(s) of Nurse Planner(s)
- 3 CE activities
- List of 6 months of activities



Application Process

- ◆ Part IV: Executive Summary
 - Narrative
 - Leadership
 - CE Practice (current & projected)
 - Review of the Environment
 - Self-Study Conduct



Application Process

- ◆ Part V: Self Study Report
 - Administrative Criterion
 - Unit Operations Criterion
 - Resources Criterion
 - Provider Unit Outcomes
Evaluation
 - Educational Design Criterion



Application Process

- ◆ Submission of 2 copies of application
- ◆ Applications complete CEARP review
- ◆ Organization/Nurse notified of results



Approved Provider Activities



- ◆ Operational requirements must be implemented by an organization throughout the period of approval.

Approved Provider Activities

- ♦ Maintain responsibility for co-provided activities.
- ♦ Maintain records for each activity for 5 years.
- ♦ Verify participation and requirements for successful completion.



Approved Provider Activities

- ◆ Provide verification of completion
 - Name of learner
 - CH awarded
 - Name & address of provider
 - Title/date of activity
 - Official accreditation statement



Approved Provider Activities

(Name of Provider) is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.



Approved Provider Activities

- ◆ Maintain timely communication with HQ AFPC/DPAMN
 - Required quarterly/annual reports
 - Notification of changes within 30 days



Approved Provider Activities

- ♦ Implement the ANCC COA system of awarding credit.



$$7 \text{ hours} \times 60 \text{ (min/hr)} = 420 \div 50 \text{ (min/hr)} = 8.4 \text{ CH}$$

Approved Provider Activities



- ◆ **PROVIDE PROGRAMS, DO NOT APPROVE PROGRAMS!!!**

Approved Provider Activities

- ◆ Ensure all activities are free from bias
- ◆ Provider maintains control if commercial support provided.



Approved Provider Activities

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